

In re: Sundai, Boniswa K

[Set forth here all names including married, maiden, and trade names used by debtor within last 8 years.]

Case No. _____

Chapter 1

Debtor

Address: 31C Jay Street

Cambridge, MA 02139

Employer's Tax Identification (EIN) No(s). [if any]: _____

Last four digits of Social-Security or Individual Tax-
Payer-Identification (ITIN) No(s)., (if any): 4094

STATEMENT OF SOCIAL SECURITY NUMBER(S)

(or other Individual Taxpayer-Identification Number(s) (ITIN(s)))

Name of Debtor (enter Last, First, Middle): Sundai, Boniswa K

Check the appropriate box and, if applicable, provide the required information.)

☒ Debtor has a Social Security Number and it is: 3 7 6 - 8 8 - 4 0 9 4
(If more than one, state all.)

☐ Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN)
it is: _____ - _____ - _____
(If more than one, state all.)

☐ Debtor does not have a Social Security Number or an Individual Taxpayer-Identification Number (ITIN).

Name of Joint Debtor (enter Last, First, Middle): _____

Check the appropriate box and, if applicable, provide the required information.)

☐ Joint Debtor has a Social Security Number and it is: _____ - _____ - _____
(If more than one, state all.)

☐ Joint Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN)
and it is: _____ - _____ - _____
(If more than one, state all.)

☐ Joint Debtor does not have a Social Security Number or an Individual Taxpayer-Identification Number (ITIN).

Under penalty of perjury that the foregoing is true and correct.



Signature of Debtor

8/2/2010

Date

Signature of Joint Debtor

Date

Debtor must provide information for both spouses.

For making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.